

2015

PLACE OF BIRTH

1. County of Gila
District of _____
Town of miami
or
City of _____

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS
ORIGINAL CERTIFICATE OF BIRTH

State Index No. 140
County Registrar No. 726
Local Registrar No. _____

No. 419 Copper Canyon St. _____ Ward _____
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child maria Magdalena Contreras } If child is not yet named, make supplemental report, as directed.

3. Sex of Child female To be answered ONLY in event of plural births. } 4. Twin, triplet or other. _____ 5. No., in order of birth. _____ 6. Legitimate? yes 7. Date of birth Sept 15 1924
Month day year

8. FATHER
Full name Antonio Legarda Contreras

14. MOTHER
Full maiden name Magdalena Ramirez

9. Residence (Usual place of abode) Miami, Arizona
If nonresident, give place and state

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If nonresident, give place and state

16. Color or race Mexican 11. Age at last birthday 27 (Years)

16. Color or race Mexican 17. Age at last birthday 18 (Years)

12. Birthplace (city or place) Mexico
(State or country)

18. Birthplace (city or place) _____
(State or country) Mexico

13. Occupation Pipe-man; Copper mine
Nature of industry

19. Occupation Housewife
Nature of industry

20. Number of children of this mother certified and including this child. } (a) Born alive and now living. 1
(b) Born alive but now dead. 0
(c) Stillborn. 0

21. Were precautions taken against ophthalmia neonatorum? yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of this child, who was alive at 7:17 P on the date above stated.
(Born alive or stillborn)

*When there was no attending physician or midwife, then the father, householder, etc. should make this return. A stillborn child is one that neither breathes nor shows other evidences of life after birth.
Signature J. J. Miller (Physician or midwife)
Address miami, Arizona

Given name added from _____
Month, day, year. Filed Sept 30, 1924 _____
County Registrar.
Filed 10-6, 1924 _____
County Registrar.

Registrar.

432-915-499

of birth stated.